



NOTICE OF SOLICITATION

SERIAL #: PH RFP 07-005

REQUEST FOR PROPOSAL FOR:

Point of Dispensing (POD) Manuals for Maricopa County

Notice is hereby given that sealed proposals will be received by the Maricopa County Department of Public Health, 4041 N. Central Avenue, #1400, Phoenix, AZ 85012, until **2:00 P.M./M.S.T. on Monday, August 21, 2006** for Serial # PH RFP 07-005. Proposals will be opened by the Public Health Procurement Officer at an open, public meeting at the above time and place.

All Proposals must be signed, sealed and addressed to the Maricopa County Department of Public Health, 4041 N. Central Avenue, #1400, Phoenix, AZ 85012 and marked **"SERIAL #: PH RFP 07-005 REQUEST FOR PROPOSAL FOR: Point of Dispensing (POD) Manuals for Maricopa County "**

The Maricopa County Procurement Code ("The Code") governs this procurement and is incorporated by this reference. Any protest concerning this request for Proposals must be filed with the Procurement Officer in accordance with Section MC1-905 of the Code.

ALL ADMINISTRATIVE INFORMATION CONCERNING THIS REQUEST FOR PROPOSAL AND THE CONTRACTUAL TERMS AND CONDITIONS CAN BE LOCATED @ <http://www.maricopa.gov/materials>. ANY ADDENDA TO THIS SOLICITATION WILL BE POSTED ON THE MARICOPA COUNTY MATERIALS MANAGEMENT WEB SITE UNDER THE SOLICITATION SERIAL NUMBER.

PROPOSAL ENVELOPES WITH INSUFFICIENT POSTAGE WILL NOT
BE ACCEPTED BY THE MARICOPA COUNTY DEPARTMENT OF PUBLIC HEALTH

INQUIRIES:

CHERYL SMITH
PROCUREMENT OFFICER
TELEPHONE: (602) 506-6886

NOTE: MARICOPA COUNTY DEPARTMENT OF PUBLIC HEALTH PUBLISHES ITS SOLICITATIONS ONLINE AND THEY ARE AVAILABLE FOR VIEWING AND/OR DOWNLOADING AT THE FOLLOWING INTERNET ADDRESS:

http://www.maricopa.gov/materials/advbd/pub_health.asp

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NO RESPONSE

Respondents not responding to this proposal are asked to complete this document and return it to Maricopa County Department of Public Health, 4041 N. Central Avenue, #1400 Phoenix, AZ 85012 or fax to 602/506-6885.

**MARK OUTSIDE ENVELOPE “SERIAL #: PH RFP 07-005
Point of Dispensing (POD) Manuals for Maricopa County**

Responses must be received **BY 2:00 P.M., Monday, August 21, 2006**. Respondents failing to submit a proposal, or this document, may be subject to removal from the Maricopa County Materials Management Contractor List.

SERIAL #: **PH RFP 07-005**

TITLE: **Point of Dispensing (POD) Manuals for Maricopa County**

CONTRACTOR NAME: _____

ADDRESS: _____

PHONE: _____ CONTACT: _____

REASON FOR NO PROPOSAL:

_____ Insufficient time

_____ Do not handle product/service

_____ Other: _____

REQUEST FOR PROPOSALS FOR: Point of Dispensing (POD) Manuals for Maricopa County

1.0 INTENT:

The Maricopa County Department of Public Health (MCDPH), Public Health Emergency Management Program (PHEM) is requesting proposals from qualified individuals or organizations to collect information on up to 50 Points of Dispensing (PODs) locations within Maricopa County and compile information into manuals. Total amount for this project may not exceed \$125,000 and is subject to grant funding. It is expected that the completion of the project will be on or before October 10, 2006.

2.0 SCOPE OF WORK:

2.1 BACKGROUND INFORMATION:

The mission of the Maricopa County Department of Public Health Emergency Management Program is to develop comprehensive, all hazards preparedness plans for Maricopa County in the event of a public health emergency.

In the event of a public health emergency Maricopa County Department of Public Health Emergency Management Program requires an ability to distribute emergency items from a variety of locations throughout the county. Each one of these Points of Distribution (PODs) are located in schools and private facilities across the county. Each POD must be prepared to act as a center of distribution for emergency supplies and services and information during times of emergency. With this need Maricopa County Department of Public Health Emergency Management Program requires assessment information on each location to be accessible to them in written and electronic form.

The information collected will include a standardized assessment of the POD, mapping information and creation of an operations manual for each location.

2.2 DUTIES:

- 2.2.1 Provide qualified personnel to complete in person site inspections on each POD location.
- 2.2.2 Complete standardized assessment (provided by Maricopa County Department of Public Health Emergency Management Program – sample available upon request) per school via on-site assessment with POD facilities input.
- 2.2.3 Draft an assessment specific to each POD as defined by POD assessment document.
- 2.2.4 Identify various points at the site location where Public Health Emergency Management activities would occur. Take digital photos (10-15 photos per site) – pictures would be presented 2 photos per 8 x 11 sheet with captions.
- 2.2.5 Provide printed color copies of the digital photos, including identifiers as provided by Public Health Emergency Management.
- 2.2.6 Obtain the current Evacuation Plan for each POD facility.
- 2.2.7 From provided POD locations GIS mapping software or suitable alternative needs to be utilized to map these locations based upon street addresses. Electronic images need to be included (jpeg, or gif format preferred) of these locations including but not limited to:
 - 1. County Map (Maricopa County)
 - 2. Regional Maps (NW, NE, SE, SW)
 - 3. GIS Coordinates
 - 4. GIS Data (Landing Zones)
 - 5. Site Maps of Locations
 - a. Street Addresses (Cross Streets)
 - b. Close-up Views of Locations

Final work product will be a PowerPoint that would allow multiple viewers to access this information. The maps should be updateable via a HTML product (such as Notebook).

It should also include one-to-a-page color copies of all maps obtained with actual POD details on them.

- 2.2.8 Provide the series of GIS maps with added information as exemplified by Public Health Emergency Management (Sample available upon request)
- 2.2.9 Up to 15 static elements will be identified (student parking, administration building, etc.) and will be placed on school GIS maps graphically. These elements are to be determined during the site inspection but will be fairly consistent throughout all PODs.
- 2.2.10 Provide a series of completed, modified GIS maps per location that will include:
 - 1. Street Level Map
 - 2. POD Overview Map
 - 3. POD Dispensing Area #1
 - 4. POD SNS Storage Area
- 2.2.11 Each Map will include:
 - 1. Traffic Flows
 - 2. Security Checkpoints
 - 3. POD Dispensing Area
 - 4. Supply delivery entrance, drop off and route
 - 5. Road Closures
 - 6. Public Entrances
 - 7. Volunteer and Security Entrances
 - 8. Barrier Locations
 - 9. MCSO officer placement
 - 10. Entrances (Secured and Public)
 - 11. POD drive-Thru Set-ups

Multiple street level maps may be required for easy reading, (samples available upon request).
- 2.2.12 All in-person assessments are to be completed by October 1, 2006. Contractor will be responsible for contacting each POD and setting assessment appointments. Public Health Emergency Management will provide Contractor with a listing of contacts and addresses for each POD.
- 2.2.13 Using the template provided by Public Health Emergency Management, two (2) identical POD manual notebooks for each location will be created. Public Health Emergency Management will provide any related general documents and a database of volunteers for each POD. Contractor will be responsible for compiling data to create the POD manuals.
- 2.2.14 All work will be provided to Maricopa County Department of Public Health Emergency Management Program in both electronic and print format.

2.3 COMPENSATION:

- Contractor must provide a total cost that will be inclusive of all duties
 - Total cost will be paid upon satisfactory completion of the deliverables.

Satisfactory Completion will be measured by:

- Documents are in the acceptable format as described in the RFP (print and electronic versions).
- Documents meet the satisfaction of Public Health Emergency Management

3.0 **SPECIAL TERMS & CONDITIONS:**

3.1 CONTRACT TERM:

The effective date of the contract is expected to be from August 25, 2006 through October 10, 2006.

3.2 OPTION TO EXTEND:

At the discretion of the County, the contract may be renewable for up to three (3) additional years (in periods of any number of months, as mutually acceptable to the parties), depending on the continued availability of funding and satisfactory contractor performance.

3.3 INDEMNIFICATION AND INSURANCE:

3.3.1 **INDEMNIFICATION**

To the fullest extent permitted by law, Contractor shall defend, indemnify, and hold harmless the County, its agents, representatives, officers, directors, officials, and employees from and against all claims, damages, losses and expenses, including but not limited to attorney fees and costs, relating to this Contract.

The amount and type of insurance coverage requirements set forth herein will in no way be construed as limiting the scope of the indemnity in this paragraph.

The scope of this indemnification does not extend to the negligence of the County.

3.3.2 **Abrogation of Arizona Revised Statutes Section 34-226:**

In the event that A.R.S. § 34-226 shall be repealed or held unconstitutional or otherwise invalid by a court of competent jurisdiction, then to the fullest extent permitted by law, CONTRACTOR shall defend, indemnify and hold harmless COUNTY, its agents, representatives, officers, directors, officials and employees from and against all claims, damages, losses and expenses (including but not limited to attorney fees, court costs, and the cost of appellate proceedings), relating to, arising out of, or resulting from CONTRACTOR'S work or services. CONTRACTOR'S duty to defend, indemnify and hold harmless, COUNTY, its agents, representatives, officers, directors, officials and employees shall arise in connection with any claim, damage, loss or expense that is attributable to bodily injury, sickness, disease, death, injury to, impairment or destruction of property including loss of use resulting therefrom, caused in whole or in part by any act or omission of CONTRACTOR, anyone CONTRACTOR directly or indirectly employs or anyone for whose acts CONTRACTOR may be liable, regardless of whether it is caused in part by a party indemnified hereunder, including COUNTY.

The scope of this indemnification does not extend to the sole negligence of COUNTY.

3.3.3 Insurance Requirements.

CONTRACTOR, at CONTRACTOR'S own expense, shall purchase and maintain the herein stipulated minimum insurance from a company or companies duly licensed by the State of Arizona and possessing a current A.M. Best, Inc. rating of B++6. In lieu of State of Arizona licensing, the stipulated insurance may be purchased from a company or companies who are authorized to do business in the State of Arizona, provided that said insurance companies meet the approval of COUNTY. The form of any insurance policies and forms must be acceptable to COUNTY.

All insurance required herein shall be maintained in full force and effect until all work or service required to be performed under the terms of the Contract is satisfactorily completed and formally accepted. Failure to do so may, at the sole discretion of COUNTY, constitute a material breach of this Contract.

CONTRACTOR'S insurance shall be primary insurance as respects COUNTY, and any insurance or self-insurance maintained by COUNTY shall not contribute to it.

Any failure to comply with the claim reporting provisions of the insurance policies or any breach of an insurance policy warranty shall not affect coverage afforded under the insurance policies to protect COUNTY.

The insurance policies may provide coverage which contains deductibles or self-insured retentions. Such deductible and/or self-insured retentions shall not be applicable with respect to the coverage provided to COUNTY under such policies. CONTRACTOR shall be solely responsible for the deductible and/or self-insured retention and COUNTY, at its option, may require CONTRACTOR to secure payment of such deductibles or self-insured retentions by a surety bond or an irrevocable and unconditional letter of credit.

COUNTY reserves the right to request and to receive, within 10 working days, certified copies of any or all of the herein required insurance policies and/or endorsements. COUNTY shall not be obligated, however, to review such policies and/or endorsements or to advise CONTRACTOR of any deficiencies in such policies and endorsements, and such receipt shall not relieve CONTRACTOR from, or be deemed a waiver of COUNTY'S right to insist on strict fulfillment of CONTRACTOR'S obligations under this Contract.

The insurance policies required by this Contract, except Workers' Compensation, shall name COUNTY, its agents, representatives, officers, directors, officials and employees as Additional Insureds.

The policies required hereunder, except Workers' Compensation, shall contain a waiver of transfer of rights of recovery (subrogation) against COUNTY, its agents, representatives, officers, directors, officials and employees for any claims arising out of CONTRACTOR'S work or service.

3.3.3.1 Commercial General Liability. CONTRACTOR shall maintain Commercial General Liability Insurance (CGL) and, if necessary, Commercial Umbrella Insurance with a limit of not less than \$1,000,000 for each occurrence with a \$2,000,000 Products/Completed Operations Aggregate and a \$2,000,000 General Aggregate Limit. The policy shall include coverage for bodily injury, broad form property damage, personal injury, products and completed operations and blanket contractual coverage including, but not limited to, the liability assumed under the indemnification provisions of this Contract which coverage will be at least as broad as Insurance Service Office, Inc. Policy Form CG 00 01 10 93 or any replacements thereof. There shall be no endorsement or modification of the CGL limiting the scope of coverage for liability arising from explosion, collapse, or underground property damage.

The policy shall contain a severability of interest provision, and shall not contain a sunset provision or commutation clause, or any provision which would serve to limit third party action over claims.

The CGL and the commercial umbrella coverage, if any, additional insured endorsement shall be at least as broad as the Insurance Service Office, Inc.'s Additional Insured, Form CG 20 10 10 01, and shall include coverage for CONTRACTOR'S operations and products.

3.3.3.2 Automobile Liability. CONTRACTOR shall maintain Automobile Liability Insurance and, if necessary, Commercial Umbrella Insurance with a combined single limit for bodily injury and property damage of no less than \$1,000,000, each occurrence, with respect to CONTRACTOR'S vehicles (including owned, hired, non-owned), assigned to or used in the performance of this Contract. If hazardous substances, materials, or wastes are to be transported, MCS 90 endorsement shall be included and \$5,000,000 per accident limits for bodily injury and property damage shall apply.

3.3.3.3 Workers' Compensation. CONTRACTOR shall carry Workers' Compensation insurance to cover obligations imposed by federal and state statutes having jurisdiction of CONTRACTOR'S employees engaged in the performance of the work or services, as well as Employer's Liability insurance of not less than \$100,000 for each accident, \$100,000 disease for each employee, and \$500,000 disease policy limit.

CONTRACTOR waives all rights against COUNTY and its agents, officers, directors and employees for recovery of damages to the extent these damages are covered by the Workers' Compensation and Employer's Liability or commercial umbrella liability insurance obtained by CONTRACTOR pursuant to this agreement.

In case any work is subcontracted, CONTRACTOR will require the Subcontractor to provide Workers' Compensation and Employer's Liability insurance to at least the same extent as required of CONTRACTOR.

3.3.4 Certificates of Insurance.

3.3.4.1 Prior to commencing work or services under this Contract, Contractor shall have insurance in effect as required by the Contract in the form provided by the County, issued by Contractor's insurer(s), as evidence that policies providing the required coverage, conditions and limits required by this Contract are in full force and effect. Such certificates shall be made available to the County upon 48 hours notice. **BY SIGNING THE AGREEMENT PAGE THE CONTRACTOR AGREES TO THIS REQUIREMENT AND FAILURE TO MEET THIS REQUIREMENT WILL RESULT IN CANCELLATION OF CONTRACT.**

In the event any insurance policy (ies) required by this contract is (are) written on a "claims made" basis, coverage shall extend for two years past completion and acceptance of CONTRACTOR'S work or services and as evidenced by annual Certificates of Insurance.

If a policy does expire during the life of the Contract, a renewal certificate must be sent to COUNTY fifteen (15) days prior to the expiration date.

3.3.4.2 Cancellation and Expiration Notice.

Insurance required herein shall not be permitted to expire, be canceled, or materially changed without thirty (30) days prior written notice to the County.

3.4 SCHEDULE OF EVENTS

Request for Proposals Issued: Wednesday, August 9, 2006

All questions must be submitted to cherylsmith@mail.maricopa.gov and be received by **2:00 P.M. MST, Monday August 21, 2006**. All questions and answers will be posted to http://www.maricopa.gov/materials/advbd/pub_health.asp with the original solicitation.

Deadline for submission of proposals Monday, August 21, 2006.

All proposals must be received before **2:00 P.M. MST** on the above date at the Maricopa County Department of Public Health, 4041 N. Central Avenue, #1400, Phoenix, AZ 85012.

Proposed Review of Proposals: Wednesday, August 23, 2006

Proposed selection and negotiation: Thursday, August 24, 2006

Proposed award of Proposal: Friday, August 25, 2006

Please note the above schedule of events is subject to change. All responses to this proposal become the property of Maricopa County and (other than pricing) will be held confidential, to the extent permissible by law. The County will not be held accountable if material from proposal responses is obtained without the written consent of the Respondent by parties other than the county.

3.5 INQUIRIES AND NOTICES:

All inquiries concerning information herein shall be addressed to:

MARICOPA COUNTY
DEPARTMENT OF PUBLIC HEALTH
ATTN: CHERYL SMITH
4041 N. CENTRAL AVENUE, #1400
PHOENIX, AZ 85012

Administrative telephone inquiries shall be addressed to:

CHERYL SMITH, PROCUREMENT OFFICER, 602-506-6886

Technical telephone inquiries shall be addressed to:

KEVIN NEILL, PHEM DIRECTOR, 602-372-2650

Inquiries may be submitted by telephone but must be followed up in writing. No oral communication is binding on Maricopa County.

3.6 INSTRUCTIONS FOR PREPARING AND SUBMITTING PROPOSALS:

Respondents are to provide one (1) original hard copy (labeled) and 5 copies of their proposal.

Respondents are to address proposals identified with return address, serial number and title in the following manner:

**Maricopa County Department of Public Health
4041 N. Central Avenue, #1400
Phoenix, AZ 85012**

SERIAL #: PH RFP 07-005

Collecting Information on Point of Dispensing (PODs) Locations for Maricopa County

Proposals must be signed by a corporate official who has been authorized to make such commitments. All prices shall be held firm for a period of one hundred twenty (120) days after the RFP closing date.

3.7 EXCEPTIONS TO THE SOLICITATION:

The Respondent shall identify and list all exceptions taken to all sections of PH RFP 07-005 and list these exceptions referencing the section (paragraph) where the exception exists and identify the exceptions and the proposed wording for the Respondent's exception. The Respondent will list these exceptions in the Proposal under the heading, "Exception to the PROPOSAL Solicitation, SERIAL #: PH RFP 07-005." **Exceptions that surface elsewhere and that do not also appear under the heading, "Exceptions to the PROPOSAL Solicitation, SERIAL #: PH RFP 07-005," shall be considered invalid and void and of no contractual significance.**

The County reserves the right to reject, render the proposal non-responsive, enter into negotiation on any of the Respondent exceptions, or accept them outright.

3.8 GENERAL CONTENT:

The Proposal submitted should be specific and complete in every detail. It should be practical and should be prepared simply and economically, providing a straightforward, concise delineation of capabilities to satisfactorily perform the Contract being sought.

The Respondent should not necessarily limit the proposal to the performance of the services in accordance with this document but should outline any additional services if the Respondent deems them necessary to accomplish the program.

3.9 FORMAT AND CONTENT:

To aid in the evaluation, it is desired that all proposals follow the same general format. The proposals are to be submitted as below:

3.9.1 Proposal Cover Sheet – Identifies the name of the Proposer responding to the RFP and the amount of funds requested.

3.9.2 Proposal – Applicants are required to complete a narrative describing how they intend to develop the plan as identified in the Scope of Work.

3.9.3 Qualifications – This section shall describe the applicant's ability and experience related to the services proposed. All project personnel, as applicable, shall be listed including a description of assignments and responsibilities, a resume of professional experience, and other pertinent information.

3.9.4 Pricing Sheet (Attachment A)

3.9.5 Agreement (Attachment B)

3.9.6 References (Attachment C)

3.10 EVALUATION OF PROPOSAL – SELECTION FACTORS:

A Proposal Review Committee shall be appointed, chaired by the Public Health Procurement Officer, to evaluate each Proposal and prepare a scoring of each Proposal to the responses as solicited in the original request. At the County's option, proposing firms may be invited to make presentations to the Evaluation Committee. Best and Final Offers and/or Negotiations may be conducted, as needed, with the highest rated Respondent(s). Proposals will be evaluated on the following criteria which are listed in order of importance.

3.10.1 Total cost

3.10.2 Proven skills and technical competence.

3.10.3 Approach and philosophy.

3.11 POST AWARD MEETING:

The successful Respondent may be required to attend a post-award meeting with the Using Agency to discuss the terms and conditions of this Contract. This meeting will be coordinated by the Procurement Officer of the Contract.

NOTE: RESPONDENTS ARE REQUIRED TO USE ATTACHED FORMS TO SUBMIT THEIR PROPOSALS.

ATTACHMENT A

Point of Dispensing (POD) Manuals for Maricopa County

PRICING SHEET

BIDDER NAME: _____
F.I.D./VENDOR #: _____
BIDDER ADDRESS: _____
P.O. ADDRESS: _____
BIDDER PHONE #: _____
BIDDER FAX #: _____
COMPANY WEB SITE: _____
COMPANY CONTACT (REP): _____
E-MAIL ADDRESS (REP): _____

PAYMENT TERMS: BIDDER IS REQUIRED TO SELECT ONE OF THE FOLLOWING.

TERMS WILL BE CONSIDERED IN DETERMINING LOW BID.
FAILURE TO CHOOSE A TERM WILL RESULT IN A DEFAULT TO NET 30.

BIDDER MUST INITIAL THE SELECTION BELOW.

NET 10	_____
NET 15	_____
NET 20	_____
NET 30	_____
NET 45	_____
NET 60	_____
NET 90	_____
2% 10 DAYS NET 30	_____
1% 10 DAYS NET 30	_____
2% 30 DAYS NET 31	_____
1% 30 DAYS NET 31	_____
5% 30 DAYS NET 31	_____

COMPENSATION/FEES:

TOTAL AMOUNT

Point of Dispensing (POD) Manuals for Maricopa County
(as defined herein)

\$ _____
(please fill in)

Respondent's signature below indicates understanding and agreement to perform the services outlined in the Request for Proposal indicated above for the total amount they have listed above.

Signature (REQUIRED)

Date

ATTACHMENT B

Point of Dispensing (POD) Manuals for Maricopa County

AGREEMENT

The Respondents hereby certify that they have read, understand and agree that acceptance by Maricopa County of the Contractor's offer by the issuance of a Purchase Order or Contract will create a binding Contract. Further, they agree to fully comply with all terms and conditions as set forth in the Maricopa County Procurement Code, and amendments thereto, together with the specifications and other documentary forms herewith made a part of this specific procurement.

BY SIGNING THIS AGREEMENT THE SUBMITTING FIRM CERTIFIES THAT THEY HAVE REVIEWED THE ADMINISTRATIVE INFORMATION AND DRAFT RFP CONTRACT TERMS AND CONDITIONS LOCATED AT <http://www.maricopa.gov/materials>. AND AGREE TO BE CONTRACTUALLY BOUND TO THEM.

MINORITY/ WOMEN-OWNED SMALL BUSINESSES (check appropriate item):

- ☐ Disadvantaged Business Enterprise (DBE)
- ☐ Women-Owned Business Enterprise (WBE)
- ☐ Minority Business Enterprise (MBE)
- ☐ Small Business Enterprise (SBE)

FIRM SUBMITTING PROPOSAL

FEDERAL TAX ID NUMBER

PRINTED NAME AND TITLE

AUTHORIZED SIGNATURE

ADDRESS

TELEPHONE FAX #

CITY STATE ZIP

DATE

WEB SITE: _____

EMAIL ADDRESS: _____

MARICOPA COUNTY, ARIZONA

BY: _____
CHERYL SMITH, PROCUREMENT OFFICER

DATE

BY: _____
WES BAYSINGER, MATERIALS MANAGEMENT

DATE

APPROVED AS TO FORM:

MARICOPA COUNTY ATTORNEY

DATE

ATTACHMENT C

CONTRACTOR REFERENCES

FIRM SUBMITTING PROPOSAL: _____

1.

COMPANY NAME:

ADDRESS:

CONTACT PERSON:

TELEPHONE:

E-MAIL ADDRESS:

2.

COMPANY NAME:

ADDRESS:

CONTACT PERSON:

TELEPHONE:

E-MAIL ADDRESS:

3.

COMPANY NAME:

ADDRESS:

CONTACT PERSON:

TELEPHONE:

E-MAIL ADDRESS:

4.

COMPANY NAME:

ADDRESS:

CONTACT PERSON:

TELEPHONE:

E-MAIL ADDRESS:

5.

COMPANY NAME:

ADDRESS:

CONTACT PERSON:

TELEPHONE:

E-MAIL ADDRESS:

EXHIBIT 1 VENDOR REGISTRATION PROCEDURES

On-line Vendor Registration at Maricopa County is available NOW!

On November 22, 2004, Maricopa County changed its vendor registration process. Paper forms will no longer be accepted. Vendor registrations will only be accepted through the active website. Register at <http://www.maricopa.gov/Materials/>

The new process will give you full control over your organizational information. Please be advised however that you are now directly responsible for the presence and accuracy of your company's information.

Vendors currently registered in our system who have changes to their information or have not registered online must establish a new account via the above web site link. Materials Management will no longer post changes to existing vendor records.

Procurement vendors: Be sure to select those commodity codes that best represent the commodities and or services provided by your organization. Non-procurement registrants may ignore the commodity portion.

Registration is **FREE**. You may use any computer with web access for registration, record updating and maintenance.

If you have any questions, email us at VendorReg@mail.maricopa.gov.